

FORM B 10 (Official Form 10) (4/01)

UNITED STATES BANKRUPTCY COURT <u>WESTERN</u> DISTRICT OF <u>PENNSYLVANIA</u>		PROOF OF CLAIM
Name of Debtor CONNOLLY FINANCIAL AKA PATRICK CONNOLLY AKA		Case Number 05-33857 TPA
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property): TCIF REO2, LLC	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Name and address where notices should be sent: BANKRUPTCY DEPARTMENT GMAC MORTGAGE CORPORATION 500 ENTERPRISE ROAD SUITE 150 HORSHAM, PA 19044 0969		THIS SPACE IS FOR COURT USE ONLY
Telephone number:		
Account or other number by which creditor identifies debtor: xxxxxxx1611		Check here if this claim <input type="checkbox"/> replaces a previously filed claim, dated: _____ <input type="checkbox"/> amends
1. Basis for Claim <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input checked="" type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____ </div> <div style="width: 50%;"> <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS #: _____ Unpaid compensation for services performed from _____ to _____ <div style="text-align: center;">(date) (date)</div> </div> </div>		
2. Date debt was incurred: <u>09/15/2000</u>		3. If court judgment, date obtained: <u>07/21/2005</u>
4. Total Amount of Claim at Time Case Filed: \$ <u>148,556.77</u> If all or part of your claim is secured or entitled to priority also complete Item 5 or 6 below. <input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.		
5. Secured Claim. <input checked="" type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ <u>40,849.97</u>		6. Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,650)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). <small>*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary 9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		THIS SPACE IS FOR COURT USE ONLY
Date 10/21/2005		
Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <div style="text-align: center;"> /s/ ANDREW L. SPIVACK, ESQUIRE Phelan Hallinan & Schmieg, LLP, ANDREW L. SPIVACK, ESQUIRE 1617 JFK Boulevard, Suite 1400, Philadelphia, PA 19103-1814, 215-563-7000 </div>		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.		

DEBTOR: CONNOLLY FINANCIAL
CREDITOR: TCIF REO2, LLC

CASE NO.: 05-33857 TPA
FILING DATE: 09/30/05

STATEMENT OF AMOUNT DUE

I. PREPETITION ARREARS

Monthly Payments	05/2004 - 03/2005, 11 months @ \$1,053.02	\$11,583.22
	04/2005 - 09/2005, 6 months @ \$1,053.03	\$6,318.18
Accrued Late Charges		\$1,894.87
NSF Fee		\$100.00
Appraisal / BPO		\$285.00
Escrow Balance		\$16,863.70
Investigation		\$100.00
Act Letters		\$50.00
Service of Complaint		\$215.00
Filing of Complaint		\$99.50
Record Owner Lien Certificate		\$325.00
Soldiers & Sailors Relief Act Search		\$5.00
Judgment / Writ of Execution		\$61.50
Notice of Sale (2)		\$270.00
Sheriff's Deposit		\$1,800.00
Title Bringdown		\$75.00
Posting of Notice of Sale		\$90.00
Objection to Plan (Bk No. 03-20024)		\$350.00
Foreclosure Fees		\$400.00
Service Refund		\$-36.00
TOTAL PREPETITION ARREARS		\$40,849.97

II. TOTAL INDEBTEDNESS

Principal Balance	\$107,693.60
Interest	\$17,914.60
Accrued Late Charges	\$1,894.87
NSF Fee	\$100.00
Appraisal / BPO	\$285.00
Escrow Advance	\$16,863.70
Investigation	\$100.00
Act Letters	\$50.00
Service of Complaint	\$215.00
Filing of Complaint	\$99.50
Record Owner Lien Certificate	\$325.00
Soldiers & Sailors Relief Act Search	\$5.00
Judgment / Writ of Execution	\$61.50
Notice of Sale (2)	\$270.00
Sheriff's Deposit	\$1,800.00
Title Bringdown	\$75.00
Posting of Notice of Sale	\$90.00
Objection to Plan (Bk No. 03-20024)	\$350.00

Foreclosure Fees	\$400.00
Service Refund	\$-36.00
TOTAL INDEBTEDNESS	\$148,556.77

A Security Interest is held for this claim.

Mortgage on Premises (see copy attached):

151 Limerick Road

Wexford, PA 15090

Per Diem Interest: \$32.75

****Debtor is responsible for the payment of all taxes and insurance****

****Most recent Sheriff's Refund is unavailable at the present time****

****Will amend Proof of Claim upon receipt of Sheriff's Refund****

****The Post-Petition monthly payment amount is \$1,053.03****

Phelan Hallinan & Schmieg, LLP
1617 JFK Boulevard
Suite 1400
Philadelphia, PA 19103-1814

UNITED STATES BANKRUPTCY COURT

IN RE	CHAPTER 13
CONNOLLY FINANCIAL	CASE NO. 05-33857 TPA
Debtor(s)	

Andrew L. Spivack, Esquire certifies that a true and correct copy of the attached Proof of Claim was served upon the following person(s):

Shawn N. Wright, Esquire
4 West Manilla Avenue
Pittsburgh, PA 15220

Ronda J. Winnecour, Esquire (Trustee)
Suite 3250, USX Tower
600 Grant Street
Pittsburgh, PA 15219

Office of The United States Trustee
1001 Liberty Avenue, Suite 970
Pittsburgh, PA 15222

October 21, 2005

/s/ ANDREW L. SPIVACK, ESQUIRE